MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6	1					
7		1				
8		1				
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TOTAL IND.	3					
TOTAL DEP.	15					
TOTAL CLAIMS	23					

		IND.	DEP.	IND.	DEP.	IND.	DEP.
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100							
TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							